								//		
/01P	E 40							DV	£ 2661	
me 11	2005							11.		
(and) ,	<u> </u>							/10/SB/17 (12-04	1V2) (1)	
TO THE TOTAL PROPERTY.	OFMARY					Approved for use the Trademark Office; U.S	S. DĚPARTMEI	NT OF COMMER	CE	
Under the Randrike			re requir	ed to respond to a co		nformation unless it dis		OMB control num	ber.	
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Number		09/766,151				
FEE TRANSMITTAL For FY 2005				Filing Date		January 19, 2001				
				First Named Inventor		Terry M. TURPIN				
	Examiner Name		R. W. Wilson							
Applicant claims small entity status. See 37 CFR 1.27				Art Unit		2661				
TOTAL AMOUNT OF PA	YMENT	(\$) 450.00		Attorney Docket	et No. 509622000		<u> </u>			
METHOD OF PAYME	NT (check all	that apply)								
Check Credit	Card I	Money Order	Noi	ne Other (please ider	ntify):				
Check Credit Card Money Order Other (please identify): X Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP										
For the above-ide	-			•		·	<u></u>			
	entified deposit (s) indicated be		ector IS			eck all that apply) idicated below, e x	cent for the	e filing fee		
	• •		namt of				webt for the			
	r additional fee(er 37 CFR 1.16	(s) or underpaym and 1.17	nent of	x Credit	any overp	payments				
FEE CALCULATION										
1. BASIC FILING, SEAR										
	FILIN	IG FEES	SE	ARCH FEES	EXAMI	NATION FEES				
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$	Small Entity) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Pa	aid (\$)		
Utility	300	150	500	250	200	100				
Design	200	100	100	50	130	65				
Plant	200	100	300	150	160	80				
Reissue	300	150	500	250	600	300				
Provisional	200	100	0	0	0	0				
2. EXCESS CLAIM FEES	;						<u>S</u> Fee (\$)	Fee (\$)		
Fee Description Each claim over 20 (inch	uding Reissues	3)					50	25		
Each independent claim	-						200	100		
Multiple dependent clain	18	•					360	180		
Total Claims Extra Claims Fee (\$) Fee I				Paid (\$) Multiple Depe						
-=	x _	= _			<u>F</u>	ee (\$) <u>F</u>	ee Paid (\$)			
Indep. Claims Ext	ra Claims	Fee (\$)	Fee I	Paid (\$)	_			-		
= 3. APPLICATION SIZE F				-						
If the specification and listings under 37 CF sheets or fraction the	drawings exceed R 1.52(e)), the	application size	fee du	e is \$250 (\$125 f	for small					
Total Sheets	Extra Sheets			dditional 50 or frac		of Fee (\$)	Fee P	aid (\$)		
		/50		(round up to a who			=			
4. OTHER FEE(S)				•	·		Fees P	Paid (\$)		
Non-English Specific		•	-							
Other (e.g., late filing	surcharge): 1	252 Extension	for re	sponse within s	econd m	onth	450	0.00		
SUBMITTED BY										
Signature	lex C	liter	و	Registration No. (Attorney/Agent)	31,942	Telephone	(703) 760	-7744		
Name (Print/Type) Alex C	hartove					Date	August 11	, 2005		





PTO/SB/21 (09-04) Approved for use through 07/31/2006. OMB 0651-0031

Linder the Pane	enwork Reduction Act of 1995, no ne	rsons are required	U.S. P	atent and Trade	emark Office; U.S. DEPARTMENT OF COMMEI rmation unless it displays a valid OMB control num					
Onder the Cape	SWOIN REGULATION FLOW, NO PO	rooms are required	Application		09/766,151					
T	RANSMITTA	L	Filing Date		January 19, 2001					
	_	First Named Inventor		Terry M. TURPIN						
FORM			Art Unit		2661					
(to be used for all correspondence after initial filing)			Examiner Name		R. W. Wilson					
Total Numbe	r of Pages in This Submission	10	Attorney Docket Number		509622000400					
ENCLOSURES (Check all that apply)										
X Fee Transi	mittal Form	Drawing(s)		[After Allowance Communication to TC					
Fee	Attached	Licensing-re	lated Papers		Appeal Communication to Board of Appeals and Interferences					
X Amendmen	nt/Reply	Petition			Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)					
X After	Final	Petition to Co		[Proprietary Information					
Affid	avits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Address			Status Letter					
X Extension	of Time Request	Terminal Disclaimer			X Other Enclosure(s) (please Identify below):					
Express Abandonment Request		Request for	Refund	,	Return Receipt Postcard					
Information Disclosure Statement		CD, Number	of CD(s)							
Certified Copy of Priority Document(s)		Landso	cape Table on	CD						
Reply to Missing Parts/ Incomplete Application		Remarks								
Repl	y to Missing Parts under FR 1.52 or 1.53									
37 C	T K 1.32 01 1.33									
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT										
Firm Name	MORRISON & FOERSTER LLP									
Signature	Chlen	lite	~e.							
Printed name	Alex Chartove	<u> </u>								
Date	August 11, 2005			Reg. No.	31,942					